

INVOICE

[Agency Name]
[Address Line 1]
[Email Address]

Invoice #: [000]
Date: [Date]
Due Date: [Date]

BILL TO:

[Client Name]
[Company Name]
[Client Address]

PROJECT / RETAINER:

[Project Name or Month]
Ghostwriting Retainer Service

DESCRIPTION	QUANTITY	RATE	AMOUNT
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Monthly Ghostwriting Retainer (Tier [X]) <small>[Details: e.g., 4x Articles, 12x Social Posts]</small>	1	\$0.00	\$0.00
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Additional Revision Cycles / Add-ons	-	\$0.00	\$0.00
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Subtotal \$0.00
Tax (0%) \$0.00
Total Due \$0.00

PAYMENT INSTRUCTIONS

Bank: [Bank Name] | Account: [Number] | Wire/Swift: [Code]

Please include invoice number in payment reference. Late payments are subject to a [0%] fee.